



Maine Department of Environmental Protection

Underground Storage Tank

Inspection Summary

Facility Name: _____ **Owner:** _____ **Reg.#:** _____

Location: _____ **Operator:** _____ **Phone:** _____

| Initial Inspection Inspection Update | TANK # | | | TANK # | | | TANK # | | | TANK # | | |
|---|--------|------|------|--------|------|------|--------|------|------|--------|------|-----|
| Volume | | | | | | | | | | | | |
| Product | | | | | | | | | | | | |
| | PASS | FAIL | N/A | PASS | FAIL | N/A | PASS | FAIL | N/A | PASS | FAIL | N/A |
| Daily Inventory | | | | | | | | | | | | |
| Automatic Tank Gauge | | | | | | | | | | | | |
| Groundwater Monitoring | | | | | | | | | | | | |
| Interstitial Monitoring | | | | | | | | | | | | |
| Overfill Prevention | | | | | | | | | | | | |
| Spill Buckets | | | | | | | | | | | | |
| Line Leak Detectors | | | | | | | | | | | | |
| Copper Piping | | | | | | | | | | | | |
| Stage I vapor recovery | | | | | | | | | | | | |
| Crash Valves | | | | | | | | | | | | |
| Cathodic Protection | | | | | | | | | | | | |
| Any FAIL in the columns above means a FAIL for that tank. | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL | | |
| | | | | | | | | | | | | |

By signing this form, I certify that I performed this inspection and believe the contents of this report to be complete and accurate at the time of inspection. I also certify that I am a properly certified Maine underground oil storage tank installer or tank inspector.

Name (please print) Date Signature

| | |
|--|---|
| Please return this certificate no later than July 1 of the year inspection is due to: | Annual UST Inspections Maine Dept. of Environmental Protection, 17 State House Station, Augusta, Maine 04333 |
| !!! KEEP A COPY OF THIS FORM FOR YOUR RECORDS !!! | |

UST Annual Inspection Report

General Instructions

1. Leak detection equipment and procedures, spill and overfill prevention devices must be checked or tested annually for proper operation. Cathodically protected tanks and piping must be checked annually to insure they are adequately protected from corrosion.
2. All work associated with testing of equipment and checking of procedures must be performed under the direct, onsite supervision of a Maine certified underground storage tank installer, or a Maine certified tank inspector.
3. Mail completed inspection forms to: Annual Tank Inspections, Maine Department of Environmental Protection, 17 State House Station, Augusta, ME 04333 by July 1 each year. **Remember to keep a copy for your records.**
4. Detailed instructions on how to fill out this form are provided in MeDEP's "UST Inspector Reference Handbook" which is available online at <http://www.maine.gov/dep/rwm/ust/index.htm>. Copies of the Annual Inspection Report form, the Inspector Reference Handbook and a list of Frequently Asked Questions (FAQ's) are also available by calling 1-207-287-2651.
5. *Please explain failing results in Comments sections. List any problems noted during inspection, even those that were corrected.*

Daily Inventory

Fill out this section only for tanks that use monthly reconciliation of Daily Inventory combined with annual SIA.

| | | TANK # | | TANK # | | TANK # | | TANK # | |
|---|---------------------------------------|--------|------|--------|------|--------|------|--------|------|
| | | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL |
| 1 | Inventory records reconciled monthly? | | | | | | | | |
| 2 | Over/Short less than 1%? | | | | | | | | |
| 3 | Fill pipe drop tube in place? | | | | | | | | |
| | Manual Inventory | | | | | | | | |
| 4 | Gauge stick in good condition? | | | | | | | | |
| | PASS or FAIL? | | | | | | | | |

Comments: _____

UST Annual Inspection Report

Automatic Tank Gauging (Singlewalled tanks only)

| | |
|----------|------------------------|
| 5 | Make and Model: |
|----------|------------------------|

Fill out this section only for tanks that use in tank testing using an ATG for leak detection.

| | | TANK # | | TANK # | | TANK # | | TANK # | |
|----------|---|--------|------|--------|------|--------|------|--------|------|
| | | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL |
| 6 | Monitoring console or control box present and working? (indicator lights, horn and printer work, paper roll installed) | | | | | | | | |
| 7 | One 0.2 gph test passed within last 30 days with tank at least 60% full (static test) or within 10% of previous month's high (continuous test)? | | | | | | | | |
| 8 | Water sensor checked by hand? | | | | | | | | |
| 9 | Product level sensor checked by hand? | | | | | | | | |
| | PASS or FAIL? | | | | | | | | |

ATTACH COPY OF ATG PRINTOUT SHOWING PASSING RESULTS TO THE INSPECTION SUBMITTED TO DEP.

Groundwater Monitoring

Fill out this section only for singlewalled heating oil tanks installed before Sept. 16, 1991.

| | | TANK # | | TANK # | | TANK # | | TANK # | |
|-----------|---------------------------------------|--------|------|--------|------|--------|------|--------|------|
| | | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL |
| 10 | Monitoring wells accessible? | | | | | | | | |
| 11 | Monitoring wells marked and secured? | | | | | | | | |
| 12 | Bailer present, functional and clean? | | | | | | | | |
| 13 | Water in well? | | | | | | | | |
| 14 | No floating oil or smell of oil? | | | | | | | | |
| 15 | Log of weekly well inspections? | | | | | | | | |
| | Pass or Fail? | | | | | | | | |

Comments: _____

UST Annual Inspection Report

Interstitial Monitoring (Tanks and Piping)

16 Make and Model:

Fill out this section for doublewalled tanks or piping that are electronically monitored.

| | | TANK # | | | TANK # | | | TANK # | | | TANK # | | |
|-----------|---|--------|------|------|--------|------|------|--------|------|------|--------|------|------|
| | | TANK | PIPE | DISP | TANK | PIPE | DISP | TANK | PIPE | DISP | TANK | PIPE | DISP |
| 17 | Interstitial monitoring system is Electronic (E), Manual (M) or None(X) | | | | | | | | | | | | |
| | | P | F | P | F | P | F | P | F | P | F | P | F |
| | Manual monitoring | | | | | | | | | | | | |
| 18 | Sump is accessible for inspection? | | | | | | | | | | | | |
| 19 | Written log of sump checks available? | | | | | | | | | | | | |
| | Electronic monitoring | | | | | | | | | | | | |
| 20 | Monitoring console is fully operational? | | | | | | | | | | | | |
| 21 | Sensors are properly placed? | | | | | | | | | | | | |
| 22 | Sensors are functioning properly? | | | | | | | | | | | | |
| | All Systems | | | | | | | | | | | | |
| 23 | Are sumps in liquid tight condition? | | | | | | | | | | | | |
| 24 | No oil in sumps or interstitial space? | | | | | | | | | | | | |
| 25 | No water in sumps or interstitial space? | | | | | | | | | | | | |
| | PASS or FAIL? | | | | | | | | | | | | |

Comments:

UST Annual Inspection Report

Overfill Prevention

| | | TANK # | | TANK# | | TANK # | | TANK # | |
|-----------|---|--------|------|-------|------|--------|------|--------|------|
| | | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL |
| 26 | Ball float(BF),Flapper(F), Electronic (E), Vent Whistle (W) or None (X)? | | | | | | | | |
| | Ball float | | | | | | | | |
| 27 | Checked and working properly? | | | | | | | | |
| 28 | Set at 90% full level? | | | | | | | | |
| | Auto shut off/flapper | | | | | | | | |
| 29 | Checked and working properly? | | | | | | | | |
| 30 | Set at 95% full level? | | | | | | | | |
| | Electronic high level alarm | | | | | | | | |
| 31 | Checked and working properly? | | | | | | | | |
| 32 | Set at 90% full level? | | | | | | | | |
| | Vent whistle (HEATING OIL ONLY) | | | | | | | | |
| 33 | Checked and working properly? | | | | | | | | |
| 34 | Set at 90%? | | | | | | | | |
| 35 | Vent within 8 ft of fill? | | | | | | | | |
| | PASS or FAIL? | | | | | | | | |

Spill Buckets

| | | TANK # | | TANK # | | TANK # | | TANK # | |
|-----------|------------------------------|--------|------|--------|------|--------|------|--------|------|
| | | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL |
| 36 | Spill buckets present? | | | | | | | | |
| 37 | Clean? | | | | | | | | |
| 38 | Liquid tight? | | | | | | | | |
| 39 | Lid in good condition? | | | | | | | | |
| 40 | Lid not touching fill riser? | | | | | | | | |
| | PASS or FAIL? | | | | | | | | |

Comments: _____

UST Annual Inspection Report

Automatic Line Leak Detectors (LLD)

Line leak detectors are required on product lines supplied by a pump remote from the dispenser.

41 Make and Model:

| | | TANK # | | TANK # | | TANK # | | TANK # | |
|-----------|--|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| 42 | Mechanical (M) or Electronic (E) LLD? | | | | | | | | |
| | | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL |
| 43 | LLD present? | | | | | | | | |
| 44 | LLD listed for use with type of piping present (rigid or flexible)? | | | | | | | | |
| | Mechanical LLD's only | | | | | | | | |
| 45 | Slow flow when 3gph leak @10PSI is simulated? | | | | | | | | |
| | Electronic LLD's only | | | | | | | | |
| 46 | One 0.1 gph or 0.2 gph test passed within last 30 days (if used for primary leak detection on single walled piping)? | | | | | | | | |
| 47 | System alarms and/or shuts off turbine when a 3gph @10PSI is simulated? | | | | | | | | |
| | PASS or FAIL? | | | | | | | | |

Piping on Heating Oil Tanks

Piping installed prior to Sep.16, 1991, must be sleeved, after that date must be secondarily contained and monitored.

| | | TANK # | | TANK # | | TANK # | | TANK # | |
|-----------|--|------------|-----------|------------|-----------|------------|-----------|------------|-----------|
| | Copper Piping | | | | | | | | |
| | | YES | NO | YES | NO | YES | NO | YES | NO |
| 48 | Piping properly sleeved? | | | | | | | | |
| 49 | Suction/Return lines separated by spacers? | | | | | | | | |

Comments: _____

UST Annual Inspection Report

Stage I Vapor Recovery (Gasoline tanks only)

| | | | | | | | | | |
|----|--|--------|------|--------|------|--------|------|--------|------|
| 50 | Gas thrupt for last calendar year _____ gals. _____ Yr | TANK # | | TANK # | | TANK # | | TANK # | |
| 51 | Stage I Vapor Recovery system is 2 Point/ Manifold (M) or Coaxial (C) | | | | | | | | |
| | | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL |
| | Two Point / Manifold System | | | | | | | | |
| 52 | Vapor recovery poppet cap and gasket in good condition? | | | | | | | | |
| 53 | Poppet valve moves easily and closes tight? | | | | | | | | |
| 54 | Manhole lid in good condition? | | | | | | | | |
| | Coaxial | | | | | | | | |
| 55 | Fill pipe in good condition? | | | | | | | | |
| | All systems | | | | | | | | |
| 56 | Fill cap and gasket in good condition? | | | | | | | | |
| 57 | Drop tube? | | | | | | | | |
| 58 | Ends within 6 inches of tank bottom? | | | | | | | | |
| | PASS or FAIL? | | | | | | | | |

Dispenser and Crash Valves

| | | DISPENSER # | | | | | | | | | | | | | | | |
|----|--------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | |
| | | P | F | P | F | P | F | P | F | P | F | P | F | P | F | P | F |
| 59 | Crash valves at correct height? | | | | | | | | | | | | | | | | |
| 60 | Crash valves secured? | | | | | | | | | | | | | | | | |
| 61 | Crash valves operational? | | | | | | | | | | | | | | | | |
| 62 | Dispenser checked for weeps & leaks? | | | | | | | | | | | | | | | | |
| | PASS or FAIL? | | | | | | | | | | | | | | | | |

Comments: _____

UST Annual Inspection Report

Cathodic Protection (Galvanic and Impressed Systems)

| | | TANK # | | TANK # | | TANK # | | TANK # | |
|----|---|--------|------|--------|------|--------|------|--------|------|
| | Enter readings in Volts | PASS | FAIL | PASS | FAIL | PASS | FAIL | PASS | FAIL |
| 63 | Tank Readings (3 locations over tank center line) | | | | | | | | |
| 64 | Product pipe reading? | | | | | | | | |
| 65 | Vent Pipe Reading? | | | | | | | | |
| 66 | Rectifier has power and is turned on? (Impressed Current Systems Only) IF NOT APPLICABLE CIRCLE → N/A | | | | | | | | |
| 67 | Monthly log present and filled out properly? (Impressed Current Systems Only) IF NOT APPLICABLE CIRCLE → N/A | | | | | | | | |
| | PASS or FAIL? | | | | | | | | |

Out of Service Tanks

Fill out this section for any tank that is no longer active (no product added or removed) or no longer has leak detection

| | | TANK # | | TANK # | | TANK # | | TANK # | |
|----|--|--------|----|--------|----|--------|----|--------|----|
| | | YES | NO | YES | NO | YES | NO | YES | NO |
| 68 | Date taken out of service (Month/Day/Year) | | | | | | | | |
| 69 | Less than 1" product? | | | | | | | | |
| | For tanks out of service more than 3 months, check the following: | | | | | | | | |
| 70 | Tank vented and fill pipe locked? | | | | | | | | |
| 71 | Product piping capped? Pumps and manways secure? | | | | | | | | |

Comments: _____

INDICATE ALL REPAIRS MADE TO BRING FACILITY INTO COMPLIANCE